

The Income and Expense information must be placed on this form. No alternative forms may be used. If you should have any questions or need assistance please call our office at 703.746.4646.

CERTIFICATION

State law requires certification by the owner or officially authorized representative. Please type or print all information except signature.)

Name of building _____

Property address _____

Type of project or building _____

Owner(s) name(s) _____

All information including the accompanying schedules and statements have been examined by me and to the best of my knowledge and belief are true, correct, and complete.

Management firm _____ Phone _____

Address _____

Date _____ Signature _____ Title _____

Print Name _____

A. BUILDING INFORMATION

- 1 Estimate of NLA _____ (sq. ft.)
- 2 # of Stories _____ (sq. ft.)
- 3 Below grade space _____ (sq. ft.)

B. PHYSICAL VACANCY INFORMATION

- 1 Space vacant January 1 (2014) _____ sq. ft. rentable
- 2 Space vacant January 1 (2013) _____ sq. ft. rentable

C. ASKING RENT INFORMATION

- 1 Current ASKING rent per sq. ft. for vacant space _____

D. Has there been a professional appraisal on this real property in the last five years? ☐ Yes ☐ No

If yes, appraiser's estimate of value \$ _____ Date of value _____

E. ANNUAL INCOME (for calendar year 2013)

Rental Income:

- | | | |
|----|---|-------|
| 01 | Potential rental income..... | _____ |
| 02 | Sales of utilities/services..... | _____ |
| 03 | Other rental income (Specify: _____) | _____ |
| 04 | Income loss from vacancy (2013)..... | _____ |
| 05 | Income loss from bad debts (2013) | _____ |
| 06 | Actual rental income received..... | _____ |

Other Income:

07 Common area maintenance reimbursement.....	_____
08 Interest income.....	_____
09 Insurance reimbursement.....	_____
10 Operating expense reimbursement.....	_____
11 Tax escalation or reimbursement	_____
12 Parking and special areas	_____
13 Other rental income (Specify: _____)	_____
14 Miscellaneous (Specify: _____)	_____
15 Miscellaneous (Specify: _____)	_____
16 Miscellaneous (Specify: _____)	_____
17 Total Other Income (Sum of lines 07 through 16)	_____
18 TOTAL ACTUAL INCOME (Sum of lines 06 and 17)	_____

F. CAPITAL IMPROVEMENTS, RENOVATIONS

Have there been Capital Improvements or Capital Renovations to the property during this reporting period?

☐ Yes ☐ No If yes, please provide total cost here and attach a detailed list on a separate page.

Reflect only the capital costs that were actually expensed in calendar year 2013.

G. ANNUAL OPERATING EXPENSES**Utilities:**

19 Water and sewer	_____
20 Electricity (excludes HVAC)	_____
Electricity (includes HVAC)	_____
21 Primary heating fuel (Specify: _____)	_____
22 Other fuel (Specify: _____)	_____
TOTAL UTILITIES	_____

Maintenance & Repairs: (excluding capital expenditures or tenant improvements)

23 Maintenance payroll (including payroll taxes and benefits)	_____
24 HVAC repairs	_____
25 Electric/plumbing repairs	_____
26 Elevator repairs	_____
27 Roof repairs	_____
28 Other common area or exterior repairs	_____
29 Miscellaneous repairs (Specify: _____)	_____
TOTAL MAINTENANCE & REPAIRS	_____

Management and Administrative:

30 Management fees	_____
31 Other administrative/payroll (including payroll taxes and benefits)	_____
32 Leasing Fees	_____
TOTAL MANAGEMENT AND ADMINISTRATIVE	_____

Services:

33 Janitorial/cleaning (payroll/contract)	_____
34 Landscape (grounds maintenance)	_____
35 Trash	_____
36 Security	_____
37 Snow removal	_____
TOTAL SERVICES	_____

Insurance and Taxes (excluding payroll taxes):

38 Insurance, Fire, Casualty (one year)	_____
39 Other taxes, fees	_____
40 Real Estate Taxes	_____
TOTAL INSURANCE AND TAXES	_____

Total Operating Expenses:

41 Total Expense	_____
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H. NET OPERATING INCOME	_____
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